(Application or Docket Number					
	PATENT A	APPLICATIO Effect	RD	SIT -0104									
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL E	YTITY	OR	OTHER SMALL		
TO	OTAL CLAIMS	•	2					RATE	FEE		RATE	FEE	
FC)R		NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00	
TC	TAL CHARGEA	ABLE CLAIMS	minus 20=		*			X\$ 9=		OR	X\$18=		
 	DEPENDENT CL	-	2 minus 3 =					X40=		OR	X80=		
MULTIPLE DEPENDENT CLAIM PRESENT								+135=		OR	+270=		
* If	the difference	column 2 ,	<u>L</u>	TOTAL	39	OR	TOTAL						
(/ Elaims as amended - Part II										2	OTHER	THAN	
	po mai forti i di anti minimo mo	(Column 1)		(Colur		(Column 3)	_	SMALL	ENTITY	OR	SMALL	ENTITY	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA	/	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	. I	Minus	** 2			Ì	X\$ 9=		OR	X\$18=	1	
	Independent	. 2	Minus	***	3	7		X40=		OR	X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					ŀ	.105			.070			
							L	+135=		OR	+270=		
	·						A	DDIT. FEE		OR ,	ADDIT. FEE		
_	(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST									1 6			
AMENDMENT B	o'	REMAINING AFTER AMENDMENT	, d	NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	##		=		X\$ 9=		OR	X\$18=		
	Independent	•	Minus	***		= '		X40=		OR	X80=		
	FIRST PRESE	NTATION OF MU	JUNIPLE DEF	PENDENT	CLAIM			+135=		OR	+270=		
							L	TOTAL			TOTAL		
		(0.1	Α	DDIT. FEE		jon ,	ADDIT. FEE						
	(Column 1) CLAIMS		(Colum		EST	(Column 3)	_		4001	l fi	<u> </u>		
AMENDMENT C		REMAINING AFTER AMENDMENT		NUMI PREVIO PAID	DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**	<u> </u>	=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=	-	X40=			X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR			
• 1	f the entry in colu	mn 1 is less than th	ne entry in colu	mn 2 write	."()" in ↔	lumn 3		+135=		OR	+270=		
**	If the "Highest Nur	mber Previously Pa	aid For" IN THE	S SPACE is	s less tha	n 20, enter "20."	Al	TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE		
***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.													

NOTICE OF FEE DUE

DATE: 06-28-04			•
TO: 7683			
FROM: Office of Initial Patent Examin	nation		
SUBJECT: Fee Due	•	•	
APPLICATION NUMBER:	494		
A fee is due for the attached document sub Office for the following reason. Please che authorization to charge a deposit account. charge the appropriate fee. If an authorizat the fee deficiency.	eck the application of the second sec	on for the appro on is present, p	priate lease
☐ Insufficient fee by check			š .
insufficient fee by check	•		
Insufficient funds in deposit account			. 9.
Declined credit card	•		
☐ Non authorization for charge to deposit	account		
☐ No fee submitted per requirement		•	
	. •		
The correct fee code:	amount	\$	• .
The suspended fee code: 1979	amount	- \$	
Fee Due	amount	=\$	
If you have any questions, please contact Cy Eleanor Kurtz at 703-308-3642.	ynthia Streater at	t 703-306-5430	oċ
Terminal Operator Balinan	·		